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Bib Data Sheet

CONFIRMATION NO. 5342

SERIAL NUMBER 10/762,533	FILING OR 371(c) DATE 01/23/2004 RULE	CLASS 606	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. GMI.0009.US
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APPLICANTS

David C. Paul, Phoenixville, PA;
 Andrew Lee, Oreland, PA;

** CONTINUING DATA *****

This application is a CIP of 10/443,755 05/23/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 04/27/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 20	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

43446

TITLE

Spine stabilization system

FILING FEE RECEIVED 547	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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